

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	MOBILE TERMINAL
Attorney Docket Number::	8001-1195
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	9
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: KATSUMI  
Middle Name::  
Family Name:: NISHIJIMA  
Name Suffix::  
City of Residence:: TOKYO  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 7-1, SHIBA 5-CHOME  
Address:: MINATO-KU  
City of Mailing Address:: TOKYO  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: AKIKO  
Middle Name::  
Family Name:: SHISHIDO  
Name Suffix::  
City of Residence:: TOKYO  
State or Province of  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing 7-1, SHIBA 5-CHOME  
Address:: MINATO-KU  
City of Mailing Address:: TOKYO

State or Province of Mailing Address::

Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: JAPAN

Status:: Full Capacity

Given Name:: MICHIO

Middle Name::

Family Name:: NAGAI

Name Suffix::

City of Residence:: TOKYO

State or Province of  
Residence::

Country of Residence:: JAPAN

Street of Mailing Address:: 7-1, SHIBA 5-CHOME

Address:: MINATO-KU

City of Mailing Address:: TOKYO

State or Province of Mailing Address::

Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::

### **Correspondence Information**

Correspondence Customer Number:: 000466

### **Representative Information**

Representative Customer Number::	000466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2003-104710	4/9/03	Yes

**Assignment Information**

Assignee Name:: NEC CORPORATION  
Street of Mailing 7-1, SHIBA 5-CHOME  
Address:: MINATO-KU  
City of Mailing Address:: TOKYO  
State or Province of Mailing Address::  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::